

Temporary Food Establishment Permit Application Lincoln-Lancaster County Health Department 3140 "N" Street, Lincoln, NE 68510

Application must be received 30 days prior to event

(Send payment to the attention of Janet English at above address)

Applicant Name		Phone	
Applicant Address	Street/Box Number	Town/State	Zip Code
			2.p 00 00
Establishment Name			
Event Name		Event Location	
Start Date of Event	Opening Time_	a.m. p.m. Pre-openi	ng inspection time:
Ending Date of Event		Ending Time	a.m. p.m.
Type of Temporary Foo	od Establishment Permit applied		
	emporary - Food must be prepared ager and food handlers must be list	on-site or in licensed facility; may in ed on reverse side of application.	clude potentially hazardous
		than 14 days. Temporary food service Food Manager and Food Handlers mu	
		onsor is responsible for all food serv ast have required Food Manager / Foo	
Temporary food service With a related Lincoln		YES Establishment Name:_	
A Non-profit Organiza	ation? NO YES I	f yes, Organization Name	
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The undersigned, as the in Establishment Permit rec	responsible person for this tempora	ry food establishment, hereby applies ter 8.20 of the Lincoln Municipal Co	s for a Temporary Food
Signature of Applicant:_ ************************************	**************************************	Date of Applic	ation:
Permit Fee:		(T CDE CITE)	
Single Event Temporary	,	Date	
\$100 regular			
	establishment or non-profit	Approved by (EHS)	
Annual Temporary		Permit Number Issued	
\$325 regular			
\$165 non-profit		Busines	s Office Use Only
(\$115 as additional facili	ty - use City application form)	Date rec'd	Amount \$
Event Market see att	ached vendor list	Check #	Initials
\$100 1 to 5 ve	endors		
\$200 6 to 10 v	vendors		
	vendors		
\$400 16 to 20	vendors - OVE	R -	

Lincoln Municipal Code 8.20 - Lincoln Food Code Section .190

Food Manager Permits and Food Handler Permits: Required.

It shall be unlawful for the Person in Charge to:

- a) Operate a food establishment without at least one Food Manager in charge of the operation and at least one Food Manager or Level III Food Handler on active duty on the premise; or
- b) Knowingly permit a person to work as an employee if such person does not hold a valid Food Manager or Food Handler Permit.

Below, please list Food Manager(s) and Food handlers working this event:

Food Manager Name	Food Manager Permit Number	Expiration Date

Food Handlers Name	Food Handler Permit Number	Expiration Date

Food Handler class schedules are available upon request by calling 441-6280 or email jenglish@ci.lincoln.ne.us.